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SLIGHRUE MION ZINN MACPEAK & SEAS
2100 PENNSYLVANIA AVENUE NW
WASHINGTON DC 20037-3202



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APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/945,089	10/17/97	013	DAVIS, R	1722
First Named Applicant	BRIERE,	35 USC 154(b) term ext.	=	0 Days.

TITLE OF INVENTION DEVICE FOR PRODUCING THERMOPLASTIC CONTAINERS BY A BLOW-MOULDING OR STRETCH BLOW-MOULDING PROCESS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 Q-48077	425-192.000	N79	UTILITY	NO	\$1210.00	04/13/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1_ Sughrue, Mion, Zinn
Macpeak & Seas, PLLC

2_

3_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE SIDEL

(B) RESIDENCE: (CITY & STATE OR COUNTRY) LE HAVRE (FRANCE)

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

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A check is attached for the issue fee payment. Please charge any payment deficiency and credit overpayment to PODA 19-4880.

4b. To _____

 Advance Order - # of Copies _____

The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *Martin Boland*
Mark Boland Reg. 32,197

(Date)
3/15/99

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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